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PADEN		Application Number	10/	10/809,241	
AMENDMENT		Application Title	I-BE	I-BEAM MOUNTED WORK LADDER	
TRANSMITTAL		Filing Date	Ma	March 25, 2004	
FORM		First Named Inventor	LaE	LaBrash	
		Art Unit	363	3634	
(to be used for all correspondence after initial filing)		Examiner Name	Chi	Chin-Shue, Alvin C.	
Total Number of Pages in This Submission		Attorney Docket Number	665	66555-43733	
ENCLOSURES (Check all that apply)					
Fee Determination Record Transmittal Form  Fee Attached  The Commissioner is hereby authorized to charge the fee of \$60 in this application to a Deposit Account 20-0823.  The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any over-payment, to Deposit Account		Extension of Time Request  If an extension or an additional extension of time is required, in not enclosed, please consider conditional petition therefore a charge Deposit Account	After Final  Aftidavits/declarations(s)  Extension of Time Request  If an extension or an additional extension of time is required, but is not enclosed, please consider this a conditional petition therefore and charge Deposit Account 20-0823		
Number		Certified Copy of Priority Document(s)  Drawing(s)  Petition  Terminal Disclaimer	ent		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name	Thompson Coburn LLP				
Signature					
Printed name Clyde L. Smith					
Date April 20, 2006		Re	g. No.	46,292	
CERTIFICATE OF FIRST CLASS MAILING  I hereby certify that this document and fee is being deposited with the United States Postal Service as "First Class" under C.F.R. 1.8 on April 20, 2006 and addressed to: Mail Stop AMENDMENT, Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.  Signature					
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Typed or printed name	Clyde L. Smith			_	

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